

**Pediatric CPR and First Aid Training
Request for Applications No ECE0414102
FAQ**

1. Is it a requirement that CPR/First aid material, including the workbooks be translated in the minimum of 4 languages? Are materials required to be translated, if your primary audience does not speak any of the 4 languages?

The DC Language Access Act of 2004 is legislation enacted to provide greater access and participation for limited and non-English proficient (LEP/NEP) individuals to District government programs, activities and public services. The Act holds covered agencies accountable for providing the District's LEP/NEP population with greater access to and participation in District programs, services and activities. All covered District agencies are required to do the following:

- **Collect data on the language spoken by the LEP/NEP constituent populations they serve and encounter, or are likely to serve and encounter;**
- **Assess the need for and offer oral language services; and**
- **Provide written translation of vital documents into any non-English language spoken by a LEP/NEP population that constitutes 3 percent or 500 individuals, whichever is fewer, of the population served or encountered, or likely to be served or encountered by the covered entity (i.e. Amharic, Chinese, French, Korean, Spanish and Vietnamese)**

CPR/First Aid materials should be translated into the language of those receiving the training. The applicant should not limit the training to what it considers its primary audience. The grantee cannot exclude a particular location or LEP/NEP group from being trained unless the LEP/NEP group is not a member of the target population.

The primary audience for the grantee will be the target populations for Pediatric CPR and First Aid Training as stated in the Request for Applications (RFA). This includes persons working in licensed child development centers and child development homes. Priority is given to individual working in facilities that participate in the Child Care Subsidy Program, relative and in-home providers and individuals who participate in OSSE/ECE funded Child Development Associate (CDA) training.

The Office of the State Superintendent of Education, Division of Early Childhood Education (OSSE/ECE) will provide the grantee with the names of the organizations it funds to provide CDA training.

2. Must all staff hired for this project have their credentials as a Trainer for CPR/First Aid, prior to the grant award?

“The Grantee must employ appropriately qualified staff, and maintain documentation that its staff members, as well as any subcontractors, possess adequate training and competence to perform assigned duties.”

The grantee does not have to have the certified trainer in place when they get the award. The applicant should provide a job description with the application outlining the qualifications of the person to be hired and indicating that certification is one of the job requirements. When the person is hired, the grantee should submit the resume to OSSE/ECE. The applicant may not want to hire the trainer until the award has been made

If not, can expense for Trainer certification be included in the grant?

No

3. I am interested to know if the grantee for the Pediatric CPR and First Aid Training is able to identify a target population for services.

See the answer to Q.1

For example, could the target population be English and Spanish speaking individuals, rather than having to serve individuals who speak the 4 foreign languages?

The grantee will be responsible for meeting the needs of the target population including supporting the LEP/NEP population, as needed. The target population could possibly consist of only English and Spanish speaking individuals if there are no other LEP/NEP groups in the target population.

If so, what would need to be translated into the 4 languages?

Please see the answer to question 1.

4. Please define what is meant by "service area" and "target population" in the RFA.

Service area refers to the geographic served by the organization or the project. For example, the service area could be one or more wards or it could be a neighborhood or cluster of neighborhoods.

Target population refers to the population, clients, or subjects intended to be identified and served by the program

5. Do the trainers have to be certified?

Yes. The Applicant's staff must include instructors/trainers certified in Pediatric CPR and First Aid by an acceptable sponsoring entity (e.g. the American Red Cross, the American Heart Association, the National Safety Council, and other similarly recognized and accredited organizations).

6. Please explain the difference in the training and certification.

The term *training* refers to the acquisition of knowledge, skills, and competencies as a result of the teaching of vocational or practical skills and knowledge that relate to specific useful competencies.

***Certification* refers to the confirmation of certain characteristics of an object, person, or organization. This confirmation is often, but not always, provided by some form of external review, education, or assessment. One of the most common types of certification is professional certification, where a person is certified as being able to competently complete a job or task, usually by the passing of an examination.**

7. My concerns again whether or not the training can be through American Heart Association or American Red Cross. The American Heart Association set and governs all the rules set forth for Pediatric CPR and First Aid Training. All Healthcare agencies follow the American Heart Association.

This is another reason (s) to follow the American Heart Association is because;

American Heart Association cards for Pediatric CPR and First Aid is a two year card. American Red Cross has a one year card for CPR and a three year card for first aid training.

You want to be consistent where all the cards expire at the same time and recertification will cover both CPR and First Aid at the same time.

The District of Columbia Child Development Facilities Regulation Act of 1998, as amended, effective April 13, 1999, D.C. Law 12-215, D.C. Official Code § 7-2036(b) (2008 Repl.) requires the "completion of training.....from acceptable sponsoring entities including the American Red Cross, the American Heart Association, the National Safety Council, and other similarly recognized and accredited organizations." The applicant can decide which guidelines to use. The goal is to support the early childhood workforce seeking Pediatric CPR and First Aid Training that leads to Pediatric CPR and First Aid Training certification from a credible source.

8. Correction. See Attached

ATTACHMENT G: Budget

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Agency:		Program Year:	
Service Area:		Project Manager:	
Budget:		Telephone Number	
CATEGORY	GRANT FUNDS	MATCHING FUNDS	TOTAL
Personnel			
Fringe Benefits			
Travel			
Equipment			
Materials and Supplies			
Consultants/Contractual			
Other (specify)			
Subtotal Direct Costs			
Indirect/Overhead (Not to exceed 10 %)			
Total			